## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

	-		
DISTRIBUTION			1
SANTA FE			
FILE		1	<del> </del>
U.S.G.4.			_
LAND OFFICE		1	
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PROBATION OFFICE			

## OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

## REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OF AND NATURAL C

I.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
Operator				<del></del>
OXY USA Inc.				
<b>}</b>	250, Midland, TX 79710	1		
Reason(s) for filing (Check proper box)	73/10		ther (Please explain)	
New Well	Change in Transporter of:			
Recompletion	Ott	Change of operator's name effective April 1, 1988		<b>:</b>
X Change in Ownership	Casinghead Gas			
If change of ownership give name	itiaa g			
and address of previous owner	Itles Service Oil & Ga	s Corp , I	0. Box 50250, Midland,	TX 79710
I. DESCRIPTION OF WELL AND	LEASE			_
Lease Name	Well No.   Pool Name, Including	Formation	Kind of Lease	
Brunson B	6 Blinebry Oil	and Gas	State, Federal or Fee	Legae
ocation				ee .
Unit Letter M 380	Feet From The South	ine and 33	O Feet From The West	
			recream the vicac	
Line of Section 3 Town	ship 22S Range	37 <u>E</u>	, ммрм,	Coun
U DESIGNATION OF THANKS				
II. DESIGNATION OF TRANSPONDED OF Authorized Transporter of Oil	ORTER OF OIL AND NATURA	L GAS		
		1	ve address to which approved copy of this	•
Texas-Mew Mexico Pipe I	ignead Gas or Dry Gas X	Box 1510	- Micland, CT 70701 re address to which approved copy of this	<del>-,</del>
Northern Matural Cas Co				form is to be sent)
	Juit Sec. Twp. Rge.	BOX 2300	- Micland, [] 70701	
	X. CENTER OF FIELD		, when	
this production is commingled with		Yes Yes		
		. give comming	ing order number:	
OTE: Complete Parts IV and V	on reverse side if necessary.			
. CERTIFICATE OF COMPLIANCE	CE.	11 .	OIL CONSERVATION DIVISI	ON
			OIL CONSERVATION DIVISI	JN '
ereby certify that the rules and regulations	of the Oil Conservation Division have	APPROVE	sp3 5 1986	. 19
en complied with and that the information in knowledge and belief.	given is true and complete to the best of	14	Orig. Signed by	,
-		BY	Paul Kautz	
		TITLE	Geologist	
0/1/1/		This	om is to be filed in a series of	
d. a. Woany			orm is to be filed in compliance with is a request for allowable for a new	
(Signature	VF. A. Vitrano	Well, this i	orm must be accompanied by a tabul	ation of the deuter
trict Operations Manager	VF. A. Vitrano - Production	tests taxen	on the well in accordance with Au	LE 111;
(Title) ch 15, 1988		able on nev	ctions of this form must be filled out wand recompleted wells.	completely for allo
(Date)		Fill ou	it only Sections I. II. III. and VI fo	or changes of own
(Dais)		well name or number, or transporter, or other such change of condition		

Separate Forms C-104 must be filed for each pool in multip completed wells.